



Attorney Docket No.: ZIP00-01  
**SMALL ENTITY**

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicants: Robert D. Haskins and Dale P. Nielsen  
Serial No.: 09/715,641  
Filing Date: November 17, 2000  
For: APPARATUS AND METHODS FOR CONTROLLING THE  
TRANSMISSION OF MESSAGES  
Examiner: Jerry B. Dennison  
Art Unit: 2143  
Conf. No.: 7793

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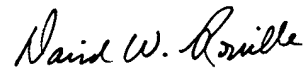
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- 2 -

Applicant hereby petitions for any extension of time which is required to maintain the pendency of this case. If there is a fee occasioned by this response, including an extension fee, that is not covered by an enclosed check, please charge any deficiency to Deposit Account No. 50-0901.

If the enclosed papers or fees are considered incomplete, the Mail Room and/or the Application Branch is respectfully requested to contact the undersigned collect at (508) 366-9600, in Westborough, Massachusetts.

Respectfully submitted,



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David W. Rouille, Esq.  
Attorney for Applicant  
USPTO Registration No.: 40,150  
CHAPIN & HUANG, L.L.C.  
Westborough Office Park  
1700 West Park Drive  
Westborough, Massachusetts 01581  
Telephone: (508) 366-9600  
Facsimile: (508) 616-9805

Attorney Docket No.: ZIP00-01

Dated: July 22, 2005



AF/2143  
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PTO/SB/31 (08-03)

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<b>NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES</b>		<b>Docket Number (Optional)</b> ZIP00-01	
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		Application Number <u>09/715,641</u>	Filed <u>November 17, 2000</u>
		For <b>APPARATUS AND METHODS FOR CONTROLLING THE TRANSMISSION OF MESSAGES</b>	
		Art Unit <u>2143</u>	Examiner <u>Jerry B. Dennison</u>
Applicant hereby <b>appeals</b> to the Board of Patent Appeals and Interferences from the decision of the examiner.  The fee for this Notice of Appeal is (37 CFR 1.17(b)) \$ _____.  <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: \$ <u>250.00</u> .  <input checked="" type="checkbox"/> A check in the amount of the fee is enclosed.  <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.  <input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.  <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. <u>50-0901</u> . I have enclosed a duplicate copy of this sheet.  <input type="checkbox"/> A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.  <b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b>  I am the <input type="checkbox"/> applicant/inventor. <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96) <input checked="" type="checkbox"/> attorney or agent of record. Registration number <u>40,150</u> <input type="checkbox"/> attorney or agent acting under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a) _____  <div style="text-align: right;"><u>David W. Rouille</u> Signature <u>David W. Rouille, Esq.</u> Typed or printed name <u>508-366-9600</u> Telephone number  <u>July 22, 2005</u> Date</div> <b>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.</b>			

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